WHY THIS AND WHY NOW?
Dental caries is the most common chronic, yet largely preventable health problem among California’s children. Untreated dental disease frequently results in expensive emergency department and hospital care.

Access to high-quality, evidence-based oral health care is limited: only 25% of young children enrolled in Medi-Cal/Denti-Cal received a preventive dental service in 2015. New funding is available to support enhanced roles of both medical and dental providers to address this problem.

To support LA County providers to address these access and quality concerns, we have designed a no-cost oral health improvement collaborative to enable providers to improve the delivery of preventive oral health services and to improve coordination with dental providers.

WHAT IS THE LEARNING COLLABORATIVE?
More LA Smiles will convene a series of three 10-month collaboratives based on the Institute for Healthcare Improvement’s Breakthrough Series Model and work done through the UCLA-First5LA Quality Improvement Learning Collaborative. Each cohort will be comprised of 10-12 teams that include clinic leadership, primary care providers, dental providers, and clinical support staff.

The Collaborative will address quality improvement fundamentals, evidence-based prevention and disease management, and integrated care delivery among medical, dental and community providers to improve children’s oral health.

Activities address clinical operations and care (e.g., team-based care, workflow redesign, oral health screenings, risk assessment, application of fluoride varnish, motivational interviewing).

WHAT ARE THE BENEFITS OF PARTICIPATION?
• **Improved practice operations** through:
  – Redesigned workflows to achieve greater efficiency, quality, and patient/family experience
  – Improved referral relationships and data sharing
  – Staff satisfaction through professional development and goal-focused teamwork

• **Increased performance** on quality measures to better position clinics for DTI funding

• **Clinical training** and resources

• **Networking opportunities and access to best practices** from national experts and other dental and medical professionals

• **Part IV Improving Performance in Practice Maintenance of Certification credit** for family physicians and pediatricians

• **Funding** to offset time away from clinic

WHO SHOULD JOIN?
We invite all LA County clinics and practices caring for children ages 0-6. Participating clinic teams should include **at least 3 individuals** representing clinic leadership, primary care providers, dental providers, and clinic support staff capable of driving change within the organization.

The application deadline is July 16, 2018 for the 2018 cohort

TO LEARN MORE, PLEASE CONTACT: Scott Cheng
scheng@dentistry.ucla.edu or 310-206-6739
About the More LA Smiles
Oral Health Improvement Collaborative

How to Learn More
- Informational webinars will be held on May 30 and June 20 from 12-1 pm. To register, email Scott Cheng (scheng@dentistry.ucla.edu)
- Applications accepted on a rolling basis. Final deadline is July 16, 2018
- Save the Date! The first learning session will be held in Los Angeles September 12-13, 2018

Collaborative Activities
- Quarterly in-person learning sessions with national experts
- Monthly action period calls to learn about best practices and identify solutions
- Assigned practice coach to support improvement
- Reporting on several measures

Clinical teams in previous collaboratives made big changes in the lives of their patients, including:
- Increasing the percentage of children with two fluoride varnish applications from 29% to 90% in 7 months
- Reducing the percentage of children with reduced caries risk from 50% to 90% in 16 months
- Increasing the frequency of completing a caries risk assessment during a well-child exam from 70% to 100% in 12 months

What Your Colleagues Are Saying...
“The program helped us in so many ways by evaluating and planning strategies to improve oral health in our Health Center. Some strategies used were: increasing access, productivity and capacity; improving quality and outcomes; educating providers and staff; and, improving data and reporting and outreach.”

- Dr. Michael Beral, St. Johns Well Child & Family Center

“The program was definitely helpful, changed our mentality. I remember one of the first Collaborative sessions with Dr. Crall where he talked about prevention and that we are past drill and fill. Now we look toward prevention, not just diagnosis and treatment. Without it, to achieve the rate we have of medical dental integration, might take us five to 10 years, but we can now do it in one to two years.”

- Dr. Binh Nguyen, AltaMed 1st Street

“It was helpful as a medical provider to learn about the pathology process.”

- Previous collaborative member

“Any strategy that requires more work by the doctors will not be sustainable. Having implemented these strategies, I can say from experience that this honors that rule.”

- Previous collaborative member